

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42962

FILED  
Feb 09, 2010  
Secretary of State

**Entity Name:** PADRON'S WEST LINDEN ESTATES HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

369 LORENZO DR.  
SPRING HILL, FL 34609

**New Principal Place of Business:**

**Current Mailing Address:**

369 LORENZO DR.  
SPRING HILL, FL 34609

**New Mailing Address:**

**FEI Number:** 59-3345051

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHANDLER, WILLIAM  
369 LORENZO DR.  
SPRING HILL, FL 34609 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: CHRISTENSEN, DICK  
Address: 446 ROMINE CT  
City-St-Zip: SPRING HILL, FL 34609

Title: PD  
Name: CHANDLER, WILLIAM  
Address: 369 LORENZO DR  
City-St-Zip: SPRING HILL, FL 34609

Title: D  
Name: RODRIC, MORGAN  
Address: 12019 JADE AVE.  
City-St-Zip: SPRING HILL, FL 34609

Title: D  
Name: ALFONSO, HECTOR  
Address: 12228 MANGO CT  
City-St-Zip: SPRING HILL, FL 34609

Title: VP  
Name: WEISENFELD, CATHY  
Address: 12088 SAPPHIRE DR  
City-St-Zip: SPRING HILL, FL 34609

Title: D  
Name: SANTANA, KATHY  
Address: 388 NESSLER WAY  
City-St-Zip: SPRING HILL, FL 34609

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM CHANDLER

PD

02/09/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date